FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



FORM D

1288455 OMB Approval

OMB Number: 3235-0076

Expires: May 31, 2005 Estimated average burden

hours per response . . .16.00

NOTICE OF SALE OF SECURITIES	SEC USE	ONLY
PURSUANT TO REGULATION D,	Prefix	Serial
SECTION 4(6), AND/OR	DATE RE	CEIVED
UNIFORM LIMITED OFFERING EXEMPTION		

Name of Offering (☐ check if this is an amenda Membership Units	nent and name has changed, and inc	dicate change.)
Filing Under (Check box(es) that apply): □ Rule	2 504 □ Rule 505 [x] Rule 506	☐ Section 4(6) ☐ ULOE
Type of Filing: □New Filing [X] Amendmen	t	ESTREGENED WING
A. BA	SIC IDENTIFICATION DAT	TA /9 9000
1. Enter the information requested about the issu	ier	MAY IL E COS
Name of issuer (☐ check if this is an amendmer OnTrack Sports LLC	nt and name has changed, and indica	ate change.)
Address of Executive Offices (Number and Stree 775 Summit Drive, Deerfield, IL 60015	et, City, State, Zip Code)	Telephone Number (Including Area Code) (847) 948-1225
Address of Principal Business Operations (Numb (if different from Executive Offices) N/A	per and Street, City, State, Zip Code	Telephone Number (Including Area Code)
Brief Description of Business: Sale of adjustable	e length junior golf clubs.	
Type of Business Organization		
□ corporation □ limit	ted partnership, already formed	[X] other (please sport) CESSE
☐ business trust ☐ limit	ted partnership, to be formed	Limited Liability Company
A de la Prima de Data Glammatian de Comp	50.63	ear MAY 1.7 2004 2001] [X] Actual
Actual or Estimated Date of Incorporation or Organ Jurisdiction of Incorporation or Organization: (E CN fo		abbreviation for State;

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is receive by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a current valid OMB control number.

Α.	BASIC	IDENTIFIC	A'	TION	DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote of disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of the corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner [X] Executive Officer ☐ Director [X] General and/or Managing Partner Full Name (Last name first, if individual) Hutsell, Jeffrey Business or Residence Address (Number and Street, City, Zip Code) 775 Summit Drive, Deerfield, IL 60015 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner [X] Executive Officer ☐ Director [X] General and/or Managing Partner Full Name (Last name first, if individual) Taylor, Neill Business or Residence Address (Number and Street, City, Zip Code) 0030 Bear Creek Lane, Redstone, CO 81623 Check Box(es) that Apply: ☐ Promoter [X] Beneficial Owner [X] Executive Officer ☐ Director [X] General and/or Managing Partner Full Name (Last name first, if individual) Rutter, Rick Business or Residence Address (Number and Street, City, Zip Code) 11221 Rosewood, Leawood, KS 66211 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner [X] Executive Officer ☐ Director [X] General and/or Managing Partner Full Name (Last name first, if individual) Hoxworth, Darrell Business or Residence Address (Number and Street, City, Zip Code) 14710 England, Overland Park, KS 66221 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director [X] General and/or Managing Partner Full Name (Last name first, if individual) Vadersen, Ernest Business or Residence Address (Number and Street, City, Zip Code) 132 Deer Haven Drive, Ponte Verde Beach, FL 32081 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director [X] General and/or Managing Partner Full Name (Last name first, if individual) McKnight, Scott Business or Residence Address (Number and Street, City, Zip Code) 1497 Hemlock, Liberty, MO 64068 Check Box(es) that Apply: ☐ Promoter [X] Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Taylor & Hutsell Enterprises, LLC

Business or Residence Address (Number and Street, City, Zip Code) 0030 Bear Creek Lane, Redstone, CO 81623

Check Box(es) that Apply: ☐ Promoter [X] Beneficial Owner ☐ Executive Officer	☐ Director	☐ General and/or
		Managing Partner
Full Name (Last name first, if individual)		
Accu-Length, LLC		
Business or Residence Address (Number and Street, City, Zip Code)		
11221 Rosewood, Leawood, KS 66211		

					B. IN	FORMA	TION A	BOUT	OFFERI	NG				
1. Has	s the issu	er sold oı	does the			•	n-accredi pendix, C				_		Yes	No [X]
2. Wh	at is the	minimun	ı investm	ent that v	vill be ac	cepted fr	om any ii	ndividual	?				\$ <u>10,0</u>	
3. Do	es the off	ering per	mit joint	ownersh	ip of a si	ngle unit	?						Yes [X]	No □
sim an a or o	ilar rem associate lealer. It	neration d person	for solici or agent on five (5	tation of of a broke) persons	purchase er or deal to be lis	ers in con ler registe	nection wered with	vith sales the SEC	of securi and/or w	ties in the	e offering or states	rectly, any com g. If a person to s, list the name you may set fort	be liste of the br	d is
Full Na	ame (Las	t name fi	rst, if ind	ividual)										
Busine	ss or Res	sidence A	ddress (N	lumber a	nd Street	, City, St	ate, Zip (Code)						
Name	of Asso	ciated Br	oker or D	ealer										
		Person I ites" or cl				nds to So	licit Purc	hasers			 [☐ All States		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]		
[IL] [MT]	[IN] [NE]	[AI] [VN]	[KS] (NH]	[KY] [NJ]	[LA] [MM]	(ME) [NY]	[MD] [NC]	[MA] [DN]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] {PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full Na	ame (Las	t name fi	rst, 11 ina	ividuai)										
Busine	ss or Res	idence A	ddress (N	lumber a	nd Street	, City, St	ate, Zip C	Code)						
Name	of Assoc	iated Bro	ker or De	aler										
States	in Which	Person I	isted Ha	s Solicite	d or Inte	nds to So	licit Purc	hasers						
•		ites" or cl									[☐ All States		
[AL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL]· [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[HO]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full N	ame (La	st name	first, if	individu	al)		, ,							
Busine	ess or R	esidence	Address	(Numb	er and S	treet, Ci	ty, State	, Zip Co	de)					
Name	of Asso	ciated B	roker or	Dealer			····· <u>·</u>				· · · · · · <u>-</u>			
States	in Whic	h Person	1 Listed	Has Sol	icited or	Intends	to Solic	it Purcha	asers					
		tates" or							***********			All States		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IN]	[IA] [NV]	(KS)	[KY] [NJ]	(LA) [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN]	[MS] [OR]	[MO] [PA]		
1 1 1 1 1		ITAA				1 7 8 7 1			I On I					

[TX] [UT] [VT] [VA] [WA] [WV] [WI] [Use blank sheet, or copy and use additional copies of this sheet, as necessary)

3 of 8

[WY]

[PR]

[RI]

[SC]

[SD]

[TN]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box

and indicate in the column below the amounts of the securities offered for

	Type of Security		Aggre Offering		A	mount Already Sold
	Debt	\$	0		_ \$	0
	Equity	\$_	2,400	,000	_ \$	610,000
	[X] Common					
	Convertible Securities (including warrants)	\$	0		_ \$	0
	Partnership Interests		0		_ \$	0
	Other (Specify)	\$	0		_ \$	0
	Total	\$	2,400	000	. \$	610,000
	Answer also in Appendix, Column 3, if filing under ULOE					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in offering and the aggregate dollar amounts of their purchases. For offerings under Rule indicate the number of persons who have purchased securities and the aggregate dollar amount their purchases on the total lines. Enter "0" if answer is "none" or "zero."	504,	Num	ber		Aggregate
			Inves	tors		ollar Amount of Purchases
	Accredited Investors		9		. \$	610,000
	Non-accredited Investors		0		. \$	0
	Total (for filings under Rule 504 only)				_ \$	
	Answer also in Appendix, Column 4, if filing under ULOE				. \$	
	Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested fo securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) mo prior to the first sale of securities in this offering. Classify securities by type listed in Par Question 1.	r all	Type	of		ollar Amount
	Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested fo securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) mo prior to the first sale of securities in this offering. Classify securities by type listed in Par	r all	Type Secu			ollar Amount Sold
	Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested fo securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) mo prior to the first sale of securities in this offering. Classify securities by type listed in Par Question 1. Type of offering	r all nths t C-	Type Secu			
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	Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested fo securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) mo prior to the first sale of securities in this offering. Classify securities by type listed in Par Question 1. Type of offering	r all nths t C-			D \$	
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	Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested fo securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) mo prior to the first sale of securities in this offering. Classify securities by type listed in Par Question 1. Type of offering Rule 505 Regulation A Rule 504 Total Furnish a statement of all expenses in connection with the issuance and distribution of securities in this offering. Exclude amounts relating solely to organization expenses of issuer. The information may be given as subject to future contingencies. If the amount of expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Legal Fees	r all nths t C-	Secu	rity	D S	Sold
	Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested fo securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) mo prior to the first sale of securities in this offering. Classify securities by type listed in Par Question 1. Type of offering Rule 505 Regulation A. Rule 504 Total Furnish a statement of all expenses in connection with the issuance and distribution of securities in this offering. Exclude amounts relating solely to organization expenses of issuer. The information may be given as subject to future contingencies. If the amount of expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees. Printing and Engraving Costs Legal Fees. Accounting Fees.	the the f an	Secu	□] [X] [X]	D S	Sold
	Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested fo securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) mo prior to the first sale of securities in this offering. Classify securities by type listed in Par Question 1. Type of offering Rule 505 Regulation A Rule 504 Total Furnish a statement of all expenses in connection with the issuance and distribution of securities in this offering. Exclude amounts relating solely to organization expenses of issuer. The information may be given as subject to future contingencies. If the amount of expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Legal Fees	the the f an	Secu	C) [X] [X] C	SSSSSSSS	Sold
	Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested fo securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) mo prior to the first sale of securities in this offering. Classify securities by type listed in Par Question 1. Type of offering Rule 505 Regulation A Rule 504 Total Furnish a statement of all expenses in connection with the issuance and distribution of securities in this offering. Exclude amounts relating solely to organization expenses of issuer. The information may be given as subject to future contingencies. If the amount of expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees	r all nths t C-	Secu		\$\$ \$\$ \$\$ \$\$ \$\$	Sold

b. Enter the difference between the aggrega and total expenses furnished in response to proceeds to the issuer."	Part C-Question 4.a. This difference i	is the "adjusted gro		\$_2,372,700
5. Indicate below the amount of the adjusted gross proceeds to the left of the estinate and check the box to the left of the estinadjusted gross proceeds to the issuer set forth in	mount for any purpose is not known, mate. The total of the payments listed	furnish an must equal the		
		_	Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and Fees			\$	□ \$
Purchase of real estate			\$	□ \$
Purchase, rental or leasing and installati	on of machinery and equipment		\$	[X] \$
Construction or leasing of plant building	gs and facilities		\$	□ \$
Acquisition of other businesses (includi offering that may be used in exchange f pursuant to a merger	or the assets or securities of another is	ssuer	\$	□ \$
Repayment of indebtedness			\$	□ \$
Working capital			\$	[X] \$ <u>2,372,700</u>
Other (specify)				
			\$	□ \$
Column Totals			\$	[X] \$ <u>2,372,700</u>
Total Payments Listed (column totals ac	dded)		[X] \$_	2,372,700
The issuer has duly caused this notice to be signology following signature constitutes an undertaking of its staff, the information furnished by the is	by the issuer to furnish to the U.S. Se	ed person. If this ecurities and Excha	ange Commission	, upon written request
Issuer (Print or Type) OnTrack Sports LLC	Signature	Date	2,2,2	
Name of Signor (Print or Type) Richard Ruffer	Title of Signer (Print or Type)	resident	and a	00
	ATTENTION	,		

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

_		E. STATE SIGNA	TURE			
1.	disqualification provisions of such	230.252(c), (d), (e) or (f) presently so rule?			Yes	N [X
2.	The undersigned issuer hereby un Form D (17 CFR 239.500) at such	dertakes to furnish to any state admir times as required by state law.	nistrator of	any state in which this notic	ce is filed, a not	ice o
3.	The undersigned issuer hereby un issuer to offerees.	dertakes to furnish to the state admir	nistrators, up	pon written request, informa	ation furnished l	by the
	Limited Offering exemption (ULC availability of this exemption has	that the issuer is familiar with the so DE) of the state in which this notice the burden of establishing that these d knows the contents to be true and	s filed and conditions	understands that the issuer of have been satisfied.	claiming the	
un	acisigned duty authorized person.					_
	r (Print or Type) rack Sports LLC	Signature		Date 5-5-200	54	
Vam	e of Signor (Print or Type)	Title of Signer (Print or Type)	Dag	sident and	$C \cap C$	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2 3 4						5		
	Intend to non-acc investo Sta (Part B-	redited ors in ite	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				ification State (if yes, ach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non Accredited Investors	Amount	Yes	No
AL	103	110			- Annount		Amount	103	1.0
AK		 							
AZ									
AR		<u> </u>							
CA						***************************************			
СО									
СТ									
DE									
DC									
FL									
GA		Х	Units @ \$10,000 per	3	\$200,000	0	0		
н									
ID		<u> </u>							
IL								 	
IN									
IA									
KS		X	Units @ \$10,000 per	4	\$170,000	0	0		
КУ								<u></u>	
LA									
ME									
MD		<u> </u>							
MA		<u> </u>							
MI						·			
MN									
MS									
МО		X	Units @ \$10,000 per	1	\$200,000	0	0		

1	2	,	3			4		:	5
	Intend to non-acc investo Sta (Part B-	redited ors in ite	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Nonaccredited Investors	Amount	Yes	No
MT									
NE									
NV									
NH									
NJ									
NM									
NY								1 2 2 2 2	
NC									
ND									
ОН									
ок									
OR									
PA									
RI									
SC									
SD									
TN			112						
TX									
UT									
VT									
VA						· · · · · · · · · · · · · · · · · · ·			
WA									
wv									
WI		Х	Units @ \$10,000 per	1	\$ 40,000	0	0		
WY									
PR									